

1 STATE OF ILLINOIS  
2 HEALTH FACILITIES AND SERVICES REVIEW BOARD  
3 LONG TERM CARE ADVISORY SUBCOMMITTEE  
4 525 West Jefferson Street, 2nd Floor  
5 Springfield, Illinois 62761  
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9 MEETING OF THE LONG TERM CARE ADVISORY SUBCOMMITTEE  
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14 The meeting of the Subcommittee was held by  
15 video and teleconference on February 28, 2017,  
16 scheduled to begin at 10:00 a.m.  
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1 MEMBERS PRESENT:

2 Michael Waxman (by telephone), Chairman

3 William Bell, Vice Chairman

4 Alan Gaffner, Member

5 Charles Foley, Member

6 Timothy Phillippe, Member

7 Judy Amiano (by telephone), Member

8 Steven Lavenda (by video), Member

9 John Florina (by telephone), Member

10 Paul Corpstein, Member

11 David Raikes (by telephone), Member

12 Denise Norman (by video), Member

13 Gerry Jenich (by video), Member

14 Suzanne Meeker (by video), Member

15

16 ALSO PRESENT:

17 Juan Morado, Jr. (by video) - HFSRB General  
Counsel

18

19 Jeannie Mitchell (by video)- HFSRB Assistant  
General Counsel

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21 George Roate (by telephone) - IDPH Staff

22 Michael Constantino - IDPH Staff

23 Coutney Avery (by telephone) -  
Administrator, HFSRB

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1     ALSO PRESENT:

2             Nelson Agbodo, HFSRB Staff

3             John Kniery - Foley & Associates

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20     Court Reporter:

          Jennifer L. Crowe, CSR

21     Illinois CSR #084-003786

          Midwest Litigation Services

22     15 S. Old State Capitol Plaza

          Springfield, Illinois 62701

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- 1 AGENDA
- 2 CALL TO ORDER
- 3 1. Roll Call
- 4 2. Approval of Agenda
- 5 3. Approval of Minutes
- 6 4. Re-cap of Report from HFSRB Meeting.
- 7 5. Joint Workshop Discussion HFSRB/LTC
- 8 Subcommittee
- 9 6. LTC Application - Jeannie Mitchell
- 10 7. Rules Update - Jeannie Mitchell
- 11 8. Other Business
- 12 9. Next Meeting Date(s)
- 13 10. Adjournment
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1 (Start time 10:09 a.m.)

2 MR. BELL: I guess we will call the meeting  
3 to order, and first we will start off with  
4 introductions, and we will go ahead and start in  
5 Chicago and then do Springfield and then the phone.

6 MR. MORADO: Great. You have a court  
7 reporter there, correct?

8 MR. BELL: Yes, we do.

9 MR. MORADO: Just so everybody, for the sake  
10 of the court reporter, I know they usually ask  
11 this, when you are going to speak, say your name  
12 first so we can keep a clean record, and this  
13 initial time, if you could spell your full name for  
14 the court reporter, that would be great.

15 And I will start off. My name is Juan  
16 Morado. I'm the General Counsel and Ethics Officer  
17 for the Health Facilities and Services Review  
18 Board. That J-U-A-N M-O-R-A-D-O, junior.

19 MS. MITCHELL: Jeannie Mitchell, Assistant  
20 General Counsel for the Health Facilities and  
21 Services Review Board. That is J-E-A-N-N-I-E,  
22 Mitchell, M-I-T-C-H-E-L-L.

23 MR. LAVENDA: My name is Steve Lavenda,  
24 S-T-E-V-E, L-A-V-E-N-D-A.

1 MS. NORMAN: Denise Norman, D-E-N-I-S-E,  
2 N-O-R-M-A-N.

3 MR. BELL: Okay. Go ahead, Paul.

4 MR. CORPSTEIN: Paul Corpstein, P-A-U-L  
5 C-O-R-P-S-T-E-I-N.

6 MR. BELL: Bill Bell, B-E-L-L. B-I-L-L  
7 B-E-L-L.

8 MR. PHILLIPPE: Tim Phillippe,  
9 P-H-I-L-L-I-P-P-E.

10 MR. KNIERY: John Kniery, K-N-I-E-R-Y.

11 MR. FOLEY: Charles Foley, F-O-L-E-Y.

12 MR. CONSTANTINO: Mike Constantino,  
13 C-O-N-S-T-A-N-T-I-N-O.

14 MR. GAFFNER: Alan Gaffner, A-L-A-N G-A-F-F  
15 as in Frank, N-E-R. I'm with the Alden Network of  
16 Long-Term Care and one of the representatives of  
17 the Healthcare Council of Illinois.

18 MR. AGBODO: Nelson Agbodo, A-G-B-O-D-O.  
19 I'm an agent for the Health Facilities & Services  
20 Review Board.

21 MR. BELL: Okay. On the phone, please.  
22 Anyone on the phone?

23 MS. MITCHELL: Mr. Waxman, are you there?  
24 Are you guys -- well, he was on your line,

1 right?

2 MR. CORPSTEIN: Where did George go?

3 MR. AGBODO: He went back to his office.

4 MR. CORPSTEIN: Said he is going to call in?

5 MR. BELL: Well, we don't know. Have we got  
6 a quorum?

7 Did you have someone join --

8 MR. MORADO: Yes, we did. Gerry, do you  
9 want to go ahead, introduce yourself?

10 MR. JENICH: Yeah. Gerry Jenich with the  
11 Long-Term Care Council.

12 MR. MORADO: Spell your name.

13 MR. JENICH: Last name J-E-N-I-C-H.

14 MR. BELL: Very good. And Juan, we do have  
15 a quorum?

16 MR. MORADO: We have a quorum, yes.

17 MR. BELL: Awesome. Very good.

18 Okay. The first item of business will be  
19 the approval of the agenda. Everyone should have  
20 received a copy of that, and I think there is extra  
21 copies if you don't have one.

22 MR. FOLEY: So moved.

23 MR. BELL: Moved from Charles Foley for  
24 adoption of the approval of the agenda. Second?

1 MR. PHILLIPPE: Second. Tim Phillippe.

2 MR. BELL: Tim Phillippe second. All in  
3 favor, aye.

4 (Ayes heard.)

5 MR. BELL: Opposed same sign.

6 (No response.)

7 MR. BELL: Okay. Thank you. Next item on  
8 the agenda is approval of the minutes, and is that  
9 -- is there one set of minutes, or is there more  
10 than one?

11 MR. MORADO: There is one set of minutes,  
12 Mr. Chair. Those minutes have been posted online  
13 on the, under the Long-Term Care Subcommittee  
14 portion of the Board's web page and are available  
15 there as well.

16 MS. MITCHELL: If I may, there are people on  
17 the phone. So we need to find a way to connect  
18 with them. Courtney just called.

19 MR. MORADO: I will try to set a conference  
20 line up here. Give us one second. I apologize.

21 (A break was taken.)

22 MR. WAXMAN: Sorry, everyone.

23 MR. BELL: We apologize for the problem that  
24 we had with the audio on the phone. We have gone



1 ahead and introduced ourselves both in Chicago and  
2 Springfield.

3 Can we get a list of the people who are on  
4 the phone, please?

5 MS. AVERY: Hi. Courtney Avery.

6 MR. ROATE: George Roate. Illinois  
7 Department of Public Health.

8 MR. WAXMAN: This is Mike Waxman.

9 MS. AMIANO: Judy Amiano.

10 MR. FLORINA: John --

11 MR. BELL: We didn't get the last name,  
12 John.

13 MR. FLORINA: F-L-O-R-I-N-A.

14 MS. MITCHELL: For those on the phone, it is  
15 a little difficult to hear you. So just make sure  
16 that you are projecting and speaking very loudly  
17 and remember to state your name when you are  
18 speaking.

19 MR. RAIKES: David Raikes, R-A-I-K-E-S.  
20 Good morning, everybody.

21 MS. MITCHELL: Good morning.

22 MR. BELL: Okay. Thank you for those on the  
23 phone that are joining the meeting. We do have a  
24 quorum.

1           MR. AVERY: Bill, I think there was someone  
2 who announced their name at the same time as Judy  
3 did.

4           MS. MEEKER: That would be me. Suzanne  
5 Meeker.

6           MR. BELL: Suzanne Meeker. Thank you,  
7 Suzanne. Okay.

8           MS. MEEKER: No problem.

9           MR. BELL: We already basically started the  
10 meeting before we got you connected, and so we have  
11 already gone through the agenda and approval of the  
12 agenda.

13           We are now at the approval of the minutes,  
14 and as Juan stated, it was available out on the web  
15 site. And has anyone or anyone have a -- I guess I  
16 need a motion for the approval of those minutes.

17           MR. MORADO: That is correct.

18           MR. PHILLIPPE: I will move.

19           MR. FOLEY: Second.

20           MR. BELL: Mr. Phillippe and Mr. Foley. Is  
21 there any discussion on those minutes?

22                           (No response.)

23           MR. BELL: Any changes, suggestions?

24                           (No response.)

1           MR. BELL: Not hearing any, we will take a  
2     vote for approval of the minutes. All in favor,  
3     aye.

4                                 (Ayes heard.)

5           MR. BELL: Opposed same sign.

6                                 (No response.)

7           MR. BELL: All right. The minutes are  
8     approved.

9           The next item on the agenda is the recap of  
10    the report of the Health Facilities and Services  
11    Review Board meeting. Who is doing that or --

12           MR. MORADO: I can. I will get us, get us  
13    started, and then I will let the members who were  
14    there actually expound on what it is they  
15    discussed.

16           I guess the first thing that I want to say  
17    is thank you very much to Mike Waxman, Bill Casper,  
18    Alan Gaffner for sitting at the table and taking  
19    the brunt of the Board's questions and helping to  
20    get a conversation going that is a very long time  
21    coming.

22           You know, the statute that enables this  
23    Board to exist, even this subcommittee calls for  
24    it, the Chairman, to update the Board on an annual

1 basis. In our bylaws we have a rule that says they  
2 are going to do it on a biannual or, sorry, on a  
3 semi-annual basis I believe.

4 In any case it has not happened in many  
5 years. So I was extremely happy and pleased that  
6 we were able to get that off the ground and have it  
7 happen. Like I say, it was a long time coming, and  
8 it was a really, to me it was one of the best parts  
9 of a board meeting that I have seen in a very long  
10 time. The Board was very engaged. They had  
11 obviously quite a few questions about the industry  
12 and different aspects which are affecting it which  
13 really can affect the way that they decide to vote  
14 on a project.

15 So I thought it was a good conversation, and  
16 I want to -- I know Alan is here in person, I know  
17 we have Mike on the phone. It might be a little  
18 bit better, Alan, since you are here and in person,  
19 if you want to go ahead and talk a little bit about  
20 what was said and your thoughts.

21 MR. GAFFNER: Certainly. Thank you. And I  
22 want to offer appreciation to Chairman Waxman who  
23 invited any of us who were willing to participate  
24 in, join in that day and for that opportunity. It

1 was a privilege to represent this whole group. I  
2 was so encouraged by what, what is a very genuine  
3 level of interest in our profession, and, in fact,  
4 Madam Chairman suggested that the questions come to  
5 an end just because of the time so that they could  
6 move through the remainder of the agenda. We did  
7 have the privilege of being invited to join them  
8 for lunch where there was some discussion that  
9 continued.

10 I agree with Juan. He has described it  
11 perfectly in that they want to meet with us again,  
12 and I think we will be looking at how that could  
13 occur, whether it is in a workshop session or  
14 whether it is in an extended format at a meeting,  
15 but clearly more time is needed.

16 Why I see this is so pivotal right now,  
17 there is a significant subset of new members on the  
18 committee now, and many of them were there that  
19 day, and so they are very new to what they are  
20 doing on the planning board and also us.

21 Chairman Waxman did a great job of  
22 summarizing what we have been doing over especially  
23 these past two years relative to looking at the bed  
24 buy sell transfer program, and he really described

1 those most difficult issues that have made it  
2 laborious for us and have really prevented us from  
3 having a final recommendation. He was very clear  
4 in how he explained that. He also talked about the  
5 work that Nelson and his staff have done as we have  
6 tried to look at bed need methodology. He  
7 explained that to them.

8 Then the discussion opened and the questions  
9 were coming from the planning board members, and  
10 they were much focused on the environment in which  
11 we operate in Illinois, and I believe that was  
12 because in the Chairman's report and Mr. Casper's  
13 remarks and what I had mentioned, we explained to  
14 them that the state's financial crisis and our  
15 Medicaid reimbursement rate is making it very  
16 difficult to come to resolution on issues like buy  
17 sell transfer, in trying to make recommendations to  
18 them because of the uncertainty of the marketplace.

19 That then brought other questions from the  
20 planning board members which is when Madam Chairman  
21 said this is a great discussion but we are going to  
22 have to move onto the next items.

23 Our ex-officio member from Public Health --  
24 Juan, forgive me for not remembering the doctor's

1 name.

2 MR. MORADO: I think you are referring to  
3 Dr. Goyal from HFS.

4 MR. GAFFNER: Oh, from HFS

5 MR. MORADO: So that is Healthcare and  
6 Family Services which, in terms of the state, they  
7 are in charge of administering the Medicare  
8 Medicaid program.

9 MR. GAFFNER: He had several questions of  
10 which I wrote them down. They pertained to  
11 reimbursement. He -- and Juan, help me recall if I  
12 am summarizing this correctly -- he mentioned that  
13 providing care to the Medicaid population in  
14 Illinois will always require everyone to, in  
15 essence, offer something up to care for this  
16 population.

17 Now, from the provider perspective, I guess  
18 because of what we have experienced in Illinois,  
19 that is a concern, and yet he identified himself as  
20 one that was very intimately involved in some of  
21 the reimbursement enhancement that did occur over  
22 the last couple of years.

23 But we were trying to explain to them the  
24 lack of margins in our business, the \$50 per day

1     shortfall in just meeting costs, not even charges  
2     just meeting costs, the challenge of if a new  
3     building goes up in proximity to an existing  
4     building, what does that do to your payer mix.  
5     That struck a real point of interest with the  
6     committee.

7             So I am so excited and --

8             MR. MORADO: That was exactly right. You  
9     know, Bill Casper let the Board know a little bit  
10    about his experience in Massachusetts, and I want  
11    to say one of his points was it was, it was more  
12    than \$50 per person in Massachusetts back in the  
13    80's. So that kind of took the Board, you know,  
14    took them back for a second. They definitely  
15    stopped and started to realize, I think, what kind  
16    of environment you folks are operating in then.

17            MR. GAFFNER: So thank you for the  
18    opportunity to summarize, Juan, and please, you or  
19    if Chairman Waxman by phone, if I am forgetting  
20    anything, I'm trying to offer a good summary.

21            We also talked about the challenge of  
22    counting beds, and we let them know the challenge  
23    with that, and we wrestle with those HUD mortgage  
24    issues and seemingly conflicting opinion even from



1 the financial market about whether those are  
2 important or they are unimportant. Obviously we  
3 have had experts on both sides of that.

4 The interchange was great. I believe the  
5 table is set and the opportunity for them to become  
6 either advocates on our part or certainly  
7 understanding that when they make these decisions,  
8 that there are all these other factors that may not  
9 hit the actual application that are very meaningful  
10 to what happens when a renovation is approved or  
11 not approved or new construction is approved or not  
12 approved. It has a domino effect that then washes  
13 over every provider.

14 And Juan, thank you for convening us with  
15 some phone calls ahead of that. I felt we were  
16 prepared and that time we took to talk enabled us  
17 to make efficient use of the time.

18 MR. MORADO: My pleasure. You know, the  
19 other thing that I wanted to touch on was that we  
20 actually had two reports that were given to the  
21 Board during that time. There was the initial, as  
22 Alan let, on about buy sell exchange program which  
23 if you ever need some reading to get you to sleep,  
24 you can read our statute and you will see in there

1     that there was supposed to be a report given on our  
2     recommendation. We did have a recommendation, and  
3     that recommendation was no recommendation because  
4     of all of the items that Mr. Gaffner just kind of  
5     expounded upon.

6             Then the second report was the more general  
7     and annual update from the long-term care  
8     subcommittee about what they think is going on in  
9     the industry, what is going on, what the Board has  
10    been doing, how they have been treating  
11    applications for long-term care applicants, those  
12    types of things.

13            And I think that, you know, this can serve  
14    two purposes, this idea of a workshop. And excuse  
15    me, Mr. Chair, we are going to kind of roll into  
16    the next one here.

17            MR. BELL:    Sure.

18            MR. MORADO:  I think this can serve two  
19    purposes.  It can be a benefit to both the Board  
20    and to you, the members of the subcommittee, as  
21    operators.

22            First it is going to educate the Board.  You  
23    know, I think Alan hit a point that makes a lot of  
24    sense.  There is only so much you can get into the

1 for corners of your application. You know, you are  
2 going to fill the application out, and we are going  
3 to have criteria, and you are either going to hit  
4 some criteria or going to miss some criteria.  
5 That's without a doubt.

6 Now, as we know from the past, missing some  
7 criteria does not kill your application, but what  
8 it can do is it can highlight what, according to  
9 our rules, may be some, I don't want to say  
10 questionable, maybe something that doesn't  
11 necessarily meet a standard.

12 So what I think this workshop can do and  
13 provide you folks is an opportunity to educate the  
14 Board on why maybe we should be looking at changing  
15 some criteria or maybe why criteria might not be as  
16 important as something else, but you can begin to  
17 kind of build your case and let them know what  
18 types of things may be working and not working.

19 They are going put it back upon us, the  
20 staff, and, you know, we will work with you to see  
21 if there is anything that can or should be changed,  
22 but I think it is a real opportunity to let them  
23 know, you know, what you think.

24 You know, I think over the past few years we

1 spent a lot of time on the exercise of trying to  
2 develop the buy sell exchange program when there  
3 were maybe three or four real issues that were  
4 driving us to make that, develop that kind of  
5 program, but what we never really did was talk  
6 about those three or four issues with the Board and  
7 educate them about, you know, why they exist, how  
8 they are affecting you, why is it affecting your  
9 applications that coming in. That's what I think  
10 this workshop can and should do. That's my  
11 opinion. But I really do think this is, it is a  
12 good opportunity.

13 So at the end of the lunch that we had,  
14 Alan, and I think you sat in for that lunch, too,  
15 Gerry.

16 MR. JENICH: Uh-huh.

17 MR. MORADO: I don't want to speak for you  
18 guys, but I think the Chair made it clear that she  
19 wants this conversation to continue, she wants us  
20 to come back. The idea of a education workshop was  
21 thrown around. Timing wise, board staff is trying  
22 to accommodate that. We are pretty packed for  
23 March already. So it wouldn't happen then. Which  
24 is good and bad. It is good because we have some

1 more time to work on it, but I don't want it to  
2 lose any momentum. I think this is something that  
3 could be good.

4 We are looking, I believe, at June at this  
5 point, and our June meeting is starting to fill up  
6 as well. But we are going to make time for it,  
7 and, you know, originally we were scheduled, I  
8 think, for 15 minutes before the Board for this  
9 January meeting, and we ran about 35, maybe 40.  
10 That's nobody's fault, that is just because the  
11 conversation was really engaging.

12 So I'm going to get us scheduled for more  
13 than 15 minutes in June, but, you know, my idea,  
14 Alan and the rest of the subcommittee is that maybe  
15 we pick kind of three or four bigger items, things  
16 we want to educate the Board about and then take  
17 them one at a time, and we can schedule more  
18 regular appearances before the Board for you.

19 You know, we have this rule in our bylaws  
20 and in the statute that you have to do it at least  
21 twice a year, but there is no reason why we  
22 couldn't do it more, and I don't see why we  
23 shouldn't. Again, it is up to people's time and  
24 schedules, but a lot of you folks go to these

1 meetings anyway. If you are going to be there, we  
2 might as well kill a couple, two birds with one  
3 stone, right?

4 So there is this idea that maybe we have a  
5 subcommittee within a subcommittee, whoever else  
6 wants to join on. We don't want to make it  
7 exclusive by any means, but if we can kind of start  
8 a discussion about which items we think we want to  
9 be the ones we are going to educate the Board on, I  
10 think this would be a good way to start.

11 MR. WAXMAN: This is Mike Waxman. Again,  
12 Alan, thank you for your time. I do believe it was  
13 a great meeting. I appreciate the time. I  
14 appreciate the time that Alan and Bill were able to  
15 share the table with me. Also I want to thank all  
16 of the staff that helped, you know, coordinate and  
17 prepare, and I agree with their findings.

18 I also found it very interesting that  
19 several members did not have a great handle on the  
20 nursing home industry, and I think it was positive  
21 that they showed that lack of understanding in the  
22 questions they asked and more positive they are  
23 willing to say we need to learn more, and hence the  
24 opportunity to come see, have a joint meeting with

1     them.

2             The other issue that we did talk about  
3     because it impacts everything we get involved with  
4     was the assisted living industry and that the  
5     building impacts us because we have no control over  
6     them and that many of us feel that the assisted  
7     living impacts people that really need services.  
8     So that issue also was addressed and brought to  
9     their attention.

10            But I firmly believe as Juan and Alan have  
11     said, we have an opportunity to educate and share,  
12     and we need to take advantage of it in the most  
13     appropriate way.

14            So, again, my thanks to everybody who helped  
15     put this together.

16            MR. MORADO: Thank you, Alan. Oh, Mike.  
17     Thank you, Alan and Mike.

18            MS. MITCHELL: Alan, you don't have to speak  
19     and you get credit.

20            MR. GAFFNER: Chairman Waxman is much better  
21     looking than I am, so I will take that as a  
22     compliment.

23            MR. MORADO: Did you want -- Gerry, did you  
24     want to maybe touch on some points, something that

1     you think we should be talking about?

2             MR. JENICH: Well, I have got a question  
3     actually, a comment and a question.

4             On the comment side I think the idea of a  
5     workshop is an excellent idea. We had a very good  
6     conversation with the doctor and Chairwoman at our  
7     table, and the idea of being able to have that kind  
8     of exchange with the members of the Board to go  
9     through some Q and A and then to take all of that  
10    back and funnel that into the purpose of the  
11    committee which is to make recommendations for rule  
12    changes, it is a huge opportunity.

13            Alan came up with the, also the suggestion  
14    that because of new board members, they get kind of  
15    trained and orientated to the process and get an  
16    opportunity to ask questions that may not -- may  
17    come up during the course of hearing applications  
18    and reviewing applications, but this is a much  
19    better process.

20            Did I understand you to suggest that this  
21    workshop would take place in the normal board  
22    meeting format?

23            MR. MORADO: I think it can. Once we get  
24    over a certain threshold it has to. But it is just



1     like anything else; it is going to be who wants to  
2     be involved and who is willing to kind of help that  
3     work along.

4             You knows, it is not a bad thing it has to  
5     be out in the open. I can easily set up one of  
6     these conference line numbers, and we can invite  
7     everybody to come in. Maybe even today. We don't  
8     have extra folks but if somebody wanted to. We do  
9     have John Knierly here who is a public attendee  
10    today. So I don't want to forget about you, John.  
11    But otherwise, you don't, you know, don't get quite  
12    as many people wanting to attend the Long-Term Care  
13    Subcommittee for some reason. So it can work out  
14    either way.

15            MR. JENICH: Yeah, my only concern or  
16    recommendation would be that we allow enough time  
17    you know, so that it is meaningful, and we are not,  
18    don't have the agenda so short that it doesn't kind  
19    of translate into some of the broader issues.

20            MR. MORADO: Right. That's why I'm  
21    wondering if we, if we maybe pick a couple and try  
22    to do them one at a time so that we can really  
23    devote part of the conversation to whatever the  
24    particular issue is.

1 MS. MITCHELL: I think by the time this, by  
2 the time this group gets together, I'm assuming  
3 very shortly, and by that time we will know, we  
4 will have a better understanding what our June  
5 agenda is going to look like. I don't think it is  
6 too heavy right now. So I do think we can  
7 definitely devote, I think, at least an hour, if  
8 not, you know, a couple to this conversation. So I  
9 think we will have enough time.

10 MR. JENICH: Great.

11 MR. MORADO: So I think just planning it  
12 out, organizing it, if we have a meeting in June  
13 and we decide we are going to have a conversation  
14 about, let's say one issue, then leading up to June  
15 we can schedule another, another one of these  
16 meetings, a full Long-Term Care Subcommittee, to  
17 kind of finalize the work that we have done and  
18 maybe a couple conference calls before we get to  
19 that point.

20 So June 3rd is the meeting?

21 MS. MITCHELL: The 21st.

22 MR. MORADO: I'm way off. Maybe we have one  
23 of these meetings again at, I don't know, bottom of  
24 April, top of May.

1 MS. MITCHELL: Probably April because we  
2 have a board meeting. So April probably.

3 MR. MORADO: April we will have one of these  
4 meetings. We will figure it out towards the end of  
5 our agenda. Then in between then we will have a  
6 couple calls in March so we can try and hammer out  
7 what it is we want to say.

8 So what I can do, I guess, is I can, I can  
9 circulate an email and maybe just compile some  
10 points if that would be easier for everybody, and  
11 then we can take a quick little vote on what we  
12 want to talk about, if we don't want to do that  
13 today, just make it a little more efficient, and  
14 then we will go from there. I will schedule a  
15 couple conference calls. We will have one maybe  
16 the second week of March and then again somewhere  
17 between that and the meeting and then we can do  
18 that.

19 MS. MITCHELL: Was somebody going to say  
20 something?

21 MR. MORADO: I didn't mean keep talking.

22 MR. BELL: Any other comments?

23 UNIDENTIFIED: Chuck, you are awfully quiet.

24 MR. MORADO: Yes, Chuck Foley is awfully

1 quite.

2 MR. FOLEY: Yes, sir.

3 MS. MITCHELL: He is saving it until the  
4 end.

5 MR. MORADO: Alan, I know I'm going to have  
6 an email from you before I get back to my office.

7 MR. BELL: Go ahead, Alan.

8 MR. GAFFNER: Thank you, Bill. Just a  
9 question for Courtney, Juan, and Jeannie.

10 Were there any topics or issues that seemed  
11 to bubble up higher from the planning board  
12 informally after that day ended?

13 MR. MORADO: You know what? I think one of  
14 the issues that folks are continually running into  
15 and, I mean, we all know about it is this idea that  
16 beds are ghost beds. That is just something that  
17 dings you folks every single time you put an  
18 application in, and then you go before the Board  
19 and you are trying to explain why it is a new  
20 facility should go in place even though there is no  
21 calculated need there.

22 To me that is something that maybe we want  
23 to talk a little bit more. You know, intertwined  
24 in that when we were having our buy/sell/exchange

1 conversations was the HUD financing. So I don't  
2 know if that's something that just goes together  
3 naturally. I know, I think it was you, Gerry,  
4 maybe you had somebody that was willing to talk to  
5 the Board about how that works.

6 MR. JENICH: Yes.

7 MR. MORADO: And Steve, you brought somebody  
8 actually, didn't you?

9 MR. LAVENDA: Brought Ted Bokios in from my  
10 office.

11 MR. MORADO: I think we should have the  
12 Board hear from these folks directly if we can  
13 bring them in, even if it is a short five minutes  
14 apiece. That's something that is really important  
15 because what I think it will do, and this is,  
16 again, part of the double benefit, I think it, one,  
17 educates the Board on what is actually happening in  
18 the industry on the ground, but then when you get  
19 that negative on your report, it gives you a better  
20 opportunity to kind of explain why it is a  
21 negative.

22 The truth is in terms of changing the rule,  
23 we are not there yet. We are not there because it  
24 is -- we try to -- I'm not -- we are trying very

1 hard to make any kind of rule changes both to the  
2 rules, the statute, the application, make sure they  
3 are really thought out all the way through before  
4 we start doing them. We don't want to be reactive,  
5 we want to make sure we are trying to be proactive.  
6 I think this might be a good way to go about that.

7 MR. GAFFNER: Thank you.

8 MR. BELL: Very good. Any other comments  
9 from either location or on the phone?

10 MR. GAFFNER: Juan, you were probably going  
11 to include the Medicaid topic as well on that  
12 laundry list for us. Was that one?

13 MR. MORADO: Absolutely.

14 MR. GAFFNER: Okay. Good. Thank you.

15 MR. MORADO: Yep.

16 MS. MITCHELL: If anybody has any ideas, I'm  
17 sure Juan would be willing to accept emails. If  
18 there is something that you are thinking of, just  
19 email him, let him know.

20 MR. MORADO: Even on weekends.

21 MS. MITCHELL: He may not respond.

22 MR. MORADO: But I will be happy to receive  
23 them.

24 MR. WAXMAN: This is Mike Waxman. I do want

1 to follow-up quickly, though. Basically for the  
2 staff, where were there any comments from the board  
3 members about our presentation that you feel you  
4 can share with us?

5 MR. MORADO: Yeah, we spoke a little bit.  
6 You know, we kind of do a debrief after the  
7 meeting. I think the general feeling was it was  
8 great that we actually had the conversation. You  
9 know, I think the feelings that I kind of professed  
10 when I first started talking about how it was  
11 really engaging and there was some genuine dialogue  
12 about issues, it was reciprocated by the Chair for  
13 sure.

14 The Vice Chair, the new Vice Chair, Richard  
15 Sewell, also really appreciated it. You know, he  
16 is a, he is a planner at a heart, and so these  
17 issues are really important to him, especially  
18 knowing what it is that what's actually happening  
19 versus what, you know, a story or a narrative  
20 that's kind of being presented; we'd like to really  
21 know what's happening on the ground. So that's  
22 good.

23 You know, just so everybody knows, we are  
24 still down one board member. So we are not at full

1 strength yet. We are at eight board members. We  
2 have two new ones. Actually, several new ones.  
3 There is Senator Burzynski, there is Jonathan  
4 Ingram, there is Marianne Murphy. None at all.  
5 Just somebody else I forget.

6 MS. MITCHELL: John McGlasson.

7 MR. MORADO: John McGlasson. So yeah, we  
8 have some new folks, and it will be good to get  
9 them some more information so they know what the  
10 heck they are doing up there.

11 MR. WAXMAN: Thanks, Juan. I'm curious. I  
12 Did sit next to -- actually Alan and I kind of sat  
13 on either side of the Chair and the feeling that I  
14 got -- I think Alan has already expressed it --  
15 she, too, was very interested in continuing this  
16 discussion. So I think that, you know, it is  
17 something that we need to do.

18 MR. MORADO: I think anybody would be hard  
19 pressed to find another chair of another state  
20 board in our fair state that is dedicated and  
21 really willing to do the hard work that comes with  
22 such a high-paid position like hers. No, she is  
23 really good. She -- you know, the application  
24 could be thousands of pages long sometimes, usually



1 hundreds of pages, and you imagine having to hear  
2 15 or 20 of those and somehow she manages to work  
3 her way through them. She has questions that are  
4 related to those. So I tip my cap to her every  
5 opportunity I get.

6 MR. FLORINA: This is John Florina. If I  
7 can offer an idea back to your topic question?

8 MR. MORADO: Yes, sir.

9 MR. FLORINA: I believe you were already  
10 addressing the issue of having a correct  
11 supply/inquiry of beds so we know how that plays  
12 into the overall need calculation.

13 MR. MORADO: Uh-huh.

14 MR. FLORINA: You may have already addressed  
15 this and talked about assisted living, I'm not sure  
16 if that's, you know, one of the topics for these  
17 so-called workshops, but possibly the consideration  
18 of the lack of the identification or the counting  
19 of those components a long-term care continuum that  
20 are not being taken into consideration such as the  
21 effect assisted living beds have on the use of  
22 nursing home beds.

23 MR. MORADO: I forget who it was that  
24 brought that up at the table, but it did -- that

1 was certainly brought up, assisted living. It was  
2 definitely more than just in passing, but it was  
3 not as in-depth as some of the other issues that  
4 were discussed. But I will certainly add that to  
5 the list, John. Thank you.

6 MR. FLORINA: Thank you.

7 MR. WAXMAN: Actually I brought it up but  
8 also trying to tie in the whole concept of demand  
9 for beds versus the kind of beds that are available  
10 in the neighborhood, you know, because there are  
11 some beds that are not really in demand or  
12 desirable, but it makes the count look like we are  
13 overbedded. So we try to explain that whole  
14 concept, too. That probably needs a little bit  
15 more explanation; that there can be a demand for  
16 let's say a rehab bed or cardiac bed or bariatric  
17 bed in a neighborhood that may be overbedded by  
18 count but doesn't have unique programming that  
19 people are looking for. So, you know, we may have  
20 to add that in the mix also again.

21 MR. FLORINA: My point is that we have a  
22 continuum of care of services and the different  
23 components, but if we are not including them in the  
24 full continuum of evaluating bed needs, how do we

1 ever come up with an accurate number if people are  
2 being served in other care settings?

3 MR. BELL: Very good. Mr. Foley?

4 MR. FOLEY: We also have to add to assisted  
5 living, supported living as well as shelter care.  
6 Those are two other levels of care that are  
7 actually being forgotten about, but they also have  
8 the opportunity of taking care of skilled patients  
9 when they shouldn't be. So we need to include  
10 those two categories in our discussion as well.

11 MR. MORADO: Great. I got those all down.

12 MR. BELL: Juan, is there any Board action  
13 that we need to take as far as a motion or  
14 anything, or is this just a discussion item and  
15 plan to move forward?

16 MR. MORADO: I think it is just a discussion  
17 and plan to move forward. We are not, certainly  
18 not recommending anything final quite yet. I think  
19 we are trying to work to that point finally, but we  
20 are not, not yet.

21 MR. BELL: Okay. Thank you. Any other  
22 discussion on the joint workshop?

23 I think it is a great idea, and I look  
24 forward to being involved in that. That's great.

1           What I could ask, though, is we are getting  
2   a little bit of feedback. If you are on the phone,  
3   if you could put it on mute when and unless you  
4   want to talk, that would probably help the  
5   discussion a little bit. Thank you.

6           Moving onto the next item on the agenda is  
7   the long-term care application, and Jeannie, I  
8   guess, was going to talk about that or discuss that  
9   issue.

10           MS. MITCHELL: Can you hear me?

11           MR. BELL: Yes.

12           MS. MITCHELL: Okay. So we updated the  
13   application of the exemption application, general  
14   CON application. So we decided to take a look at  
15   the long-term care application also. Many of the  
16   changes that we made across the board were just to  
17   make the application sound a little less technical  
18   and to streamline some language. So I want to go  
19   through with you. We will go page by page on this  
20   application to review the changes.

21           UNIDENTIFIED: Which page?

22           MS. MITCHELL: Let's do the red line ones.  
23   So the first page we hope to get this live on the  
24   internet in March. So it is March 2017 edition,

1 but you see here just page changes because there  
2 are changes later on, and you will see Appendix C  
3 and D are removed. That's because I don't know  
4 when, but those appendices no longer exist in the  
5 rule. So those sections were put elsewhere. So  
6 just to make this more accurate, we took them out.

7 And then the next page, this basically, this  
8 page here is in all of the applications. So we  
9 just streamlined some of the language here and  
10 consistent with the other applications.

11 Same thing with the next page. We corrected  
12 some citations. You will see flood plane  
13 requirements. It was, the executive order number  
14 was incorrect and provided some updated numbers for  
15 the historic preservation requirements.

16 So most of these changes really are not  
17 substantive. I don't think any really are.

18 You will see page 2 of the application  
19 itself, we added some boxes there for under  
20 "Applicant". We found that not only is it  
21 important to have the name of the registered agent  
22 or the name of the CEO but to have their address  
23 and zip code, telephone number as well in case we  
24 need it in the future. So we added those boxes

1     there.

2             MR. BELL:  A quick question.

3             MS. MITCHELL:  Yes?

4             MR. BELL:  Do you need a phone number for  
5     the registered agent?

6             MS. MITCHELL:  Oh, yes.  We can add that.  
7     Thank you for catching that.

8             Okay.  So the next couple of pages are  
9     pretty easy.  Middle of page 4 we added a citation  
10    for where those requirements are found.

11            Okay.  And page 5 and 6, this looks like it  
12    is new language, but it is not.  This is what was  
13    in Appendices C and D, we just moved it up on the  
14    application.

15            Then the next couple of pages pretty  
16    self-explanatory, just streamline some language.

17            And then page 10 you see criteria 1125.510  
18    removed.  It was, that was not a proper citation.  
19    What it is citing to is really just something that  
20    tells us which criteria is relevant to which  
21    project.  So that was not necessarily accurate, so  
22    we took that out.

23            And then page 12 you will see Appendices C  
24    and D.  Page 12 through 15 has been removed from

1 all of them. That is because, again, those do not  
2 exist. And then expansion, it tracks the  
3 requirements that aren't necessarily requirements  
4 under rule, so we removed those.

5 Okay. Takes to us to page 16. Again,  
6 streamlining language.

7 And then page 17, what it said was required  
8 was not necessarily 100% accurate. For instance,  
9 it said number 1 through 4 was required and number  
10 5, but the way the rule is written it is 1 and 2  
11 and then also 3 and 4 or 5. So just making that  
12 clear to follow, to track the language in the rule.

13 If I am -- am I going too fast?

14 MR. JENICH: So can you repeat this one  
15 again, Jeannie?

16 MS. MITCHELL: Before it said 1 through 4  
17 was required and also 5, but it is really 1 and 2  
18 and 3 and 4 or 5. So just some modifications to  
19 that, and that's tracking the language in the rule.

20 MR. JENICH: Okay. So it is 1 and 2 and?

21 MS. MITCHELL: 3 and 4 or 5.

22 MR. JENICH: You have to meet the first two?

23 MS. MITCHELL: Right, and then 3 and 4 or 5.

24 MR. JENICH: Got ya. And then one of the

1 remaining three? Is that the correct  
2 interpretation or is it 1 and 2 and 3, 4 and 5?

3 MS. MITCHELL: 3 and 4 or 5. It is either.  
4 So if it is not 5, you have to meet 3 and 4. If it  
5 is not 3 and 4, you have to meet 5.

6 MR. JENICH: Okay.

7 MS. MITCHELL: Everybody okay with that?  
8 All right.

9 And then next page some edits there.

10 Okay. Page 20 is the next one. Again, you  
11 know, we didn't add anything here that's not  
12 required in the rule. So under Service  
13 Accessibility there is that 45-minute normal travel  
14 time. Those that have submitted applications know  
15 you submit that information anyway, so this we are  
16 just putting it in the application itself since it  
17 is already required.

18 MR. BELL: Jeannie, I notice in the addition  
19 that we will talk about next on the proposed rules,  
20 it takes that 45-minute travel time out and puts in  
21 a distance. Will that be changed --

22 MS. MITCHELL: Yes.

23 MR. BELL: -- when that rule becomes final?

24 MS. MITCHELL: Yes, yes.



1 MR. BELL: Okay.

2 MS. AMIANO: Sorry, this is Judy. Just for  
3 clarification, that will stay at 45 minutes, or  
4 will it change to 20 miles?

5 MS. MITCHELL: Once, once -- can't change it  
6 to 20 miles because those rules aren't adopted yet,  
7 but once the rules are adopted, we will update all  
8 the applications to reflect that.

9 MS. AMIANO: Great. Thank you for the  
10 clarification.

11 MS. MITCHELL: No problem.

12 Okay. Next few pages are just updating some  
13 language.

14 MR. FLORINA: Jeannie, I do have a question  
15 on page 21. This is John Florina. Maybe the  
16 wording was in there before, but we are talking  
17 about something that occurred during the latest  
18 12-month period.

19 MS. MITCHELL: Right. Go ahead.

20 MR. FLORINA: Is it an occurrence one time  
21 during the 12 months, you know, one month in the 12  
22 months or average? I'm sure there is going to be  
23 some technical question about that.

24 MS. MITCHELL: So all I did was move, you

1 will see I copied the parenthetical and just moved  
2 it to the end of the sentence. So that requirement  
3 is the same as it was before. I will let Mike or  
4 George answer that question as far as that review  
5 criteria. We are on page 21, Unnecessary  
6 Duplication/Maldistribution, 3b, Mike or George.

7 MR. CONSTANTINO: We will look at a 12-month  
8 period. We don't look at individual months. Just  
9 the average. We just look at the average.

10 MR. FLORINA: I'm not trying to make an  
11 issue out of it, just since the language was being  
12 -- I asked. Whatever is acceptable is fine with  
13 me.

14 MS. MITCHELL: Okay. And then to page 26,  
15 we basically just added citations for some of the  
16 requirements because I notice in going through some  
17 of these sections that there are a lot of words,  
18 and then if you have to go back to the rule to find  
19 where it is located, sometimes it is difficult. So  
20 we just thought it would be a little easier if we  
21 provided citations for you.

22 Page 27, number 6 under, Establishment of  
23 Chronic Mental Illness, you will see that there is  
24 a added, and again, that's just required in the

1 rule, so thought it best to add it here. And same  
2 thing for under number 7d, it is required in the  
3 rule.

4 Page 30, there was an error here. So you  
5 see the Financial Viability Waiver section was  
6 deleted. That should not have been deleted. So  
7 that change will be reflected in the updated or in  
8 one that's posted online.

9 And then pages 35, 36, 37, again, remember I  
10 said Appendices C and D are no longer in those  
11 sections, so we just deleted that and, as I told  
12 you earlier, moved it up in the application. And  
13 then the index of attachments was amended to  
14 reflect the current attachment numbers that are  
15 required going forward. Any questions?

16 All right. Well, I just I wanted to share  
17 this with you before we posted online just in case  
18 there is questions. But we hope within the next  
19 week or two to get this up on the web site, and it  
20 will be available also as a fillable PDF, too. So  
21 not just in Word, which may be beneficial to some  
22 people.

23 MR. MORADO: We are inching our way into the  
24 future.

1           MR. BELL: Okay. Juan, is there, is there  
2 any board or subcommittee action needed on this, or  
3 is this just an informational --

4           MR. MORADO: This is more informational just  
5 to add a little bit more. You know, for anybody  
6 who may have noticed, we also redid the Certificate  
7 of Need application recently as well as the  
8 Certificate of Exemption application which  
9 desperately needed some updates because there was  
10 some major changes in the last two years. We are  
11 just trying to clean things up a bit, and that's  
12 it.

13          MR. BELL: Okay. Are there any further  
14 questions from anyone on the Long-Term Care  
15 application?

16          MR. GAFFNER: I just have one.

17          MR. BELL: Yes, Al?

18          MR. GAFFNER: The changes that are here when  
19 it goes online, those will take effect at that  
20 point, or is that initial online listing, is that a  
21 posting period for comments? Forgive me, I'm just  
22 trying to determine the mechanics on that.

23          MS. MITCHELL: So this is not a rule change,  
24 it is just change to the application. So there is

1 no, there is no comment period.

2 MR. GAFFNER: Okay.

3 MS. MITCHELL: So if there is a question,  
4 now is the time. Now is the time to raise it  
5 before we put it online. Not to say revisions  
6 can't be made later, but, you know, we would like  
7 to get as complete and thorough copy online as  
8 quickly as possible.

9 MR. BELL: I think what Alan is asking is  
10 once it is posted, it is effective, correct?

11 MS. MITCHELL: Correct, correct. So that  
12 will be the new application that people, we would  
13 like people to use.

14 MR. GAFFNER: All right.

15 MR. MORADO: Part of the reasoning behind  
16 that is we are not, we are not doing anything new  
17 in terms of setting up new rules, it is just kind  
18 of using what we have and making sure that the  
19 application is up-to-date as possible.

20 MR. BELL: What was the expected date again  
21 or what is the hopeful date?

22 MS. MITCHELL: By mid March. I mean, it  
23 could be today, it could be Friday, but just I will  
24 say by mid March just to be safe.

1 MR. BELL: Thank you.

2 MR. MORADO: Why don't we actually say mid  
3 March, and then you guys have it now. If you did  
4 have any comments that you can't think of at this  
5 moment, let us know. That will give us a little  
6 bit of time to make any changes that we would like.

7 MR. GAFFNER: Thank you.

8 MR. BELL: Very good. Appreciate that. All  
9 right. Unless there is any other questions or  
10 discussion, we will move onto the next item on the  
11 agenda which is the rules update, and Jeannie, you  
12 are back on the, back on this one.

13 MS. MITCHELL: I have the floor again. So  
14 this proposed rule change is -- sorry --

15 MR. BELL: Again, if you are on the phone,  
16 please mute your line if possible because we are  
17 getting a lot of feedback. Okay, Jeannie.

18 MS. MITCHELL: Okay. This proposed rule  
19 change does three things. It, one, adds language  
20 from House Bill 3510 which you will remember was  
21 from, I think, two legislative sessions ago at this  
22 point. Makes a couple of minor technical changes  
23 and makes some of the changes that we discussed at  
24 the last meeting.

1           At the last meeting we presented Nelson and  
2   Jesse's report where we examined transitioning from  
3   normal travel times to distance and discussed that  
4   instead of looking at a 45-minute equivalent, we  
5   would look at a 30-minute equivalent.

6           So it was determined that the 30-minute  
7   equivalent is 20 miles, and then depending on where  
8   the project is located, whichever factor that needs  
9   to be applied.

10          Do you not have this?

11          MR. JENICH: I don't think I have that one.

12          MS. MITCHELL: You do, you just have a few  
13   pages. We decided just pages with the changes.

14          MR. JENICH: Thank you.

15          MS. MITCHELL: No problem. Depending on  
16   where the project the located, the assigned factor  
17   would be applied.

18          So it was determined that the City of  
19   Chicago, the factor of .5 or the equivalent of 10  
20   miles; for metro areas it is .8 or the equivalent  
21   of 16 miles, and for rural areas a factor 1.0 or 20  
22   miles.

23          So since that meeting Nelson and Jesse  
24   increased their sample size for a time study to

1 make sure that those numbers were as accurate as  
2 possible. They will conclude their study this  
3 week, but so far report that the new data is so  
4 consistent with the old data that no changes are  
5 foreseen.

6 Because we are not going to have another  
7 subcommittee meeting before the Board meeting in  
8 March, I wanted to present this to you now because  
9 my hope is to get the Board's approval for this  
10 rule change as well as the other rules that are  
11 going to be affected by this and get those filed  
12 after the meeting. So late March, early April so  
13 that we can move towards a process of making this  
14 transition to distance.

15 So let's go through right now and look at  
16 the changes. So on page 3, that's language from  
17 House Bill 3510. So just tracking language from  
18 the statute.

19 And then page 29, just there was a typo. So  
20 just fixed that.

21 And then on pages, page 36 you will see  
22 where we moved from 45 minutes to using that  
23 20-mile distance. So that's on page 36, page 37,  
24 and I think that's it.



1           So, again, this is a rule change that  
2   doesn't just affect the long-term care community,  
3   it affects the entire CON community because we are  
4   making a whole transition, and we just thought that  
5   moving from time to distance would be more  
6   beneficial for everyone because it is fixed. Also  
7   reducing that time is more accurate with what is in  
8   line with, you know, the population of what's going  
9   on in today's world.

10           So is there any questions on that? Or are  
11   there any questions on that?

12           Doing such a good job nobody has anything.

13           MR. KNIERY: I would have a question, if I  
14   may.

15           MS. MITCHELL: Sure, sure.

16           MR. KNIERY: This is John Kniery. I would  
17   just put it out there for this group, I just want  
18   to get feedback. Do we all feel that this being  
19   the same for hospitals and other health care  
20   communities, is it, is it still relevant for  
21   long-term care?

22           Is this okay to look at, or is this --  
23   should there be something different for long-term  
24   care service area? Is there any feedback or any

1 thought on that?

2 MR. PHILLIPPE: I would assume -- this is  
3 just from biased opinion. This is Tim Phillippe --  
4 is that in general you would expect to be closer to  
5 long-term care because back when I was in the  
6 insurance business, we had standards for networks  
7 for hospitals. That was a longer distance because  
8 you are coming into a very big center with lots of  
9 services. You tend to say shorts periods of time.

10 Long-term care today, the important thing is  
11 actually access for the family, and as you get past  
12 that 20 minute, few minutes, it because bigger  
13 issue in general. You have more really, we have  
14 more long-term care facilities than hospitals,  
15 don't we? I tend to think that way. So you would  
16 think that would be closer than a hospital.

17 MR. KNIERY: I just that had as a question.  
18 You know, I have seen that with what we have done,  
19 and I was just curious on relevancy. I don't know,  
20 you know, what the next step would be but --

21 MS. MITCHELL: Well, here is what I -- first  
22 I want to make a point that we are, we are reducing  
23 the geographic area from which you are being  
24 compared by. So I think, you know, that's a step

1 in the right direction.

2 I do see your point as being evaluated the  
3 same as hospitals, but I don't know that right now  
4 we have a lot of time to really explore that. So  
5 what I would propose is if we are okay with this  
6 because, you know -- again, this is not just for  
7 the long-term care community. All these change  
8 have to be made at the same time -- that we move  
9 forward with this, and then we continue the  
10 conversation and look at reducing that sample, that  
11 size, geographic area for long-term care  
12 communities and figuring out what that would be at  
13 a future date.

14 MR. KNIERY: Great idea.

15 MR. BELL: If I am not mistaken, Jeannie,  
16 will be a proposal; it will go into public comment  
17 so people can have a chance to do that at that  
18 point also.

19 MS. MITCHELL: It will. Definitely.  
20 Definitely.

21 MR. BELL: This will be taken up by the  
22 mother board at their next meeting; is that the  
23 plan?

24 MS. MITCHELL: Yes, that's the plan. Last

1 time we couldn't get to rules, so hopefully this  
2 time we do.

3 MR. MORADO: We lost quorum at the very end  
4 of the meeting. It all went to heck after that.

5 MR. BELL: So then if any of the members of  
6 the subcommittee have concerns or questions or some  
7 guidance or direction that they would like to  
8 provide to the staff of the Department, you know,  
9 please let them know and make sure that they have  
10 your justification and not just change it to this.  
11 Let them know why you are suggesting that, the  
12 change.

13 MS. MITCHELL: Agreed.

14 MR. BELL: Okay. Is there any other  
15 discussion on this item?

16 Does anyone have any other questions or  
17 comments for Jeannie?

18 MR. GAFFNER: Jeannie, I'm sorry because I  
19 gotten through everything once but not as  
20 thoroughly as I had hoped.

21 Is the proposed rule here, does that include  
22 the reference to the 10 miles for Chicago, the 16  
23 on suburbs and 20 rural? I'm noticing red line on  
24 36 but --

1 MS. MITCHELL: That's reflected in a  
2 different rule, and that would be a rule 1100. I  
3 didn't provide that today. I think I provided that  
4 last time. So it won't say 10, 16 and 20, it will  
5 have factors, .5, .8 and 1.0. So, you know, 20  
6 times .5, 20 times .8 and 20 times 1.0, and that  
7 gives you mileage.

8 MR. GAFFNER: It will take those .5, .8, 1.0  
9 factors against the, against the 20 miles?

10 Ms. MITCHELL: Right, because -- and the  
11 reason is because this 20 miles applies across the  
12 board. So the way it was designed before and I  
13 think it is a good way that it was designed, it was  
14 a good thing it was designed that way, it is in one  
15 central location what those factors are instead of  
16 repeating everytime those 20 miles are mentioned,  
17 10 miles, 16 miles and 20 miles, if that makes  
18 sense.

19 MR. GAFFNER: That starting number that the  
20 factors apply against, that's against the 45 minute  
21 original interval?

22 MS. MITCHELL: Those factors -- well, the  
23 factors in the rule now, yes, applies to those 45  
24 minutes, but the new factors apply to 20 miles

1     which is equivalent of 30 minutes.

2             MR. GAFFNER: Thank you.

3             MS. MITCHELL: No problem.

4             MR. BELL: Other questions? Again, Juan,  
5     there is no need for Board action on that item,  
6     correct?

7             MR. MORADO: No.

8             MR. BELL: Okay. The next item on the  
9     agenda is other business. I'll open it up to the  
10    members if they have got any other business that  
11    they would like to bring up in front of the  
12    committee, subcommittee? Yes?

13            MR. FOLEY: What is latest on legislative  
14    issues? I know we have got a couple bills pending  
15    right now, so wonder if Juan or Jeannie could give  
16    us an update on legislative issues.

17            MR. MORADO: Certainly. I will defer to  
18    Jeannie. She is one of our legislative gurus.

19            MS. MITCHELL: I don't know about that. The  
20    Board has legislation, but it doesn't affect -- it  
21    is just cleaning up Health Facilities Act. It  
22    doesn't affect the long-term care community at all.  
23    Again, there is legislation to get rid of the  
24    Board. That would potentially affect the

1 subcommittee. From what we know -- we hope it  
2 doesn't go anywhere.

3 MR. MORADO: Where is it at right now?

4 MS. MITCHELL: Right now it is in the  
5 subcommittee. There was supposed to be a subject  
6 matter hearing last week, but it didn't happen. I  
7 have not checked back to see if it has been  
8 rescheduled to next week, but my guess is probably.

9 MS. AVERY: This is Courtney. Yeah, it is  
10 going to be scheduled for next week. Have not got  
11 the exact date yet.

12 MS. MITCHELL: Right. So if you, we hope  
13 you believe in the Board, and if you are against  
14 that legislation, feel free to turn in a slip and  
15 oppose the bill.

16 MR. MORADO: What is the bill number?

17 MS. MITCHELL: That is Bill 384, House Bill  
18 384.

19 MR. JENICH: Is that in the Rules Committee?

20 MS. MITCHELL: No, Cost and Benefits  
21 Analysis Committee. It is a new committee.

22 MR. MORADO: Imagine a subcommittee, too.

23 MS. MITCHELL: Yeah, Analytics Subcommittee.

24 UNIDENTIFIED: Very official.

1 MR. MORADO: That's the thought I guess.

2 MR. BELL: Any other business or any other  
3 under other business that people would like to  
4 bring up?

5 MR. MORADO: You know what? The only thing  
6 we have not done yet is open it up for opportunity  
7 for public comment.

8 So if there is a -- I think we have one  
9 public member here. If he has any other comments  
10 and he is more than willing to make one, great.

11 MR. KNIERY: No. Thank you.

12 MS. MITCHELL: Because he has not spoken at  
13 all in this meeting so far.

14 MR. FOLEY: I assume our association is  
15 working with House Bill 384. I don't know what the  
16 stance are between health care and services and  
17 leading agency, what position, their take is on  
18 this bill.

19 MR. BELL: I don't know. I'm not involved  
20 that much in the legislative side of things. I  
21 know that, I'm sure that Matt and Ashley are  
22 following it, but I don't know. I have not seen  
23 any official position from the association. I sure  
24 think they would be opposed to it, but I don't know



1 for sure.

2 MR. FOLEY: Alan, anything from your  
3 association?

4 MR. FOLEY: Not that I am aware of at the  
5 present, Charles.

6 MR. FOLEY: Okay. Thank you.

7 MR. MORADO: So if we can maybe look towards  
8 the next meeting date.

9 MR. BELL:: Yes, sir.

10 MR. MORADO: I think we talked about the end  
11 of April, May. I propose April 25th. How does  
12 that look for people?

13 MS. AVERY: In person or video conference?

14 MR. MORADO: Well, this would be probably in  
15 person. Video conference with some in-person  
16 opportunity as well, and then in between that I'm  
17 going to send out emails so we can get a couple of  
18 those conference calls going for the workshop  
19 discussions. So the plan would be --

20 MS. MITCHELL: Sorry. Do we have a  
21 conflict?

22 MR. PHILLIPPE: That's the date of the  
23 Leading Age board meeting, and so a couple of us  
24 are on that board.

1 UNIDENTIFIED: When is the board meeting?

2 MS. MITCHELL: The board meeting is the  
3 first, the second rather. That first weekend in  
4 May. So the 9th.

5 MR. MORADO: May 9th, how does that sound?

6 MR. PHILLIPPE: Good.

7 MR. MORADO: Courtney?

8 Ms. AVERY: I will just check on the rooms  
9 or something.

10 MS. MITCHELL: Okay.

11 MR. MORADO: Great. Let's say May 9th.

12 Yes, we are going to check on the room reservation  
13 today because as the Chicago folks here know, space  
14 is a premium, and so we will try to get back into  
15 our old offices at 69 West Washington. We should  
16 be able to get one of the rooms down in  
17 Springfield. At the very least we will have a  
18 call-in number. So that's it. All right.

19 MR. BELL:: All right. Is there any other  
20 business for the subcommittee at this point in  
21 time? Any comments, any suggestions, any other  
22 thing? Any other business?

23 MR. MORADO: Yes, Juan?

24 MR. MORADO: One more thing.

1           MR. WAXMAN: This is Mike Waxman. Again, I  
2 would like to thank staff for taking control of the  
3 meeting -- (phone ringing) very appropriate. Thank  
4 you.

5           MR. BELL: Juan?

6           MR. MORADO: I had one last thing. I just  
7 wanted to take a quick opportunity to introduce, I  
8 don't believe you know her, Denise Norman, our  
9 newest member to the Long-Term Care Subcommittee.

10          MS. NORMAN: Thank you.

11          MR. MORADO: Give us a wave. She comes to  
12 us with a great deal of experience in the industry.  
13 We are very lucky to have her. Her appointment was  
14 made official by the Chair, I think, about a month  
15 ago now that I sent her letter out or actually I  
16 called her. The letter was in the mail as they  
17 say. But nevertheless she is appointed. We are  
18 very happy to have her. Thank you, and I hope you  
19 enjoyed your first meeting.

20          MS. MITCHELL: They're not all short, so --  
21 very efficient.

22          MR. BELL: Not hearing anymore business, I  
23 will take a motion to adjourn.

24          MR. FOLEY: So moved.

1           MR. GAFFNER:   Second.

2           MR. BELL:   Second by Alan Gaffner.   Thank  
3   you very much.   I appreciate it.   All in favor,  
4   aye.

5                           (Ayes heard.)

6           MR. BELL:   Opposed?

7                           (No response.)

8           MR. BELL:   Again, thank you, everyone, for  
9   attending both in person or on the phone, and I,  
10   too, value staff's input, and thank you very much  
11   for all the work that you do.   Thank you.

12                       (Meeting concluded at 11:18 a.m.)

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# MEETING OF THE LONG TERM CARE ADVISORY SUBCOMMITTEE 2/28/2017

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